

PROJECT 10073 RECORD CARD

| | | | | | |
|---|--|---|--|---|--|
| 1. DATE 5 Aug 63 | | 2. LOCATION West Haven, Connecticut | | 12. CONCLUSIONS <input type="checkbox"/> Was Balloon <input type="checkbox"/> Probably Balloon <input type="checkbox"/> Possibly Balloon <input type="checkbox"/> Was Aircraft <input checked="" type="checkbox"/> Probably Aircraft <input type="checkbox"/> Possibly Aircraft <input type="checkbox"/> Was Astronomical <input type="checkbox"/> Probably Astronomical <input type="checkbox"/> Possibly Astronomical <input type="checkbox"/> Other Unsubstantiated Report <input type="checkbox"/> Insufficient Data for Evaluation <input type="checkbox"/> Unknown | |
| 3. DATE-TIME GROUP Local _____ GMT 06/0148Z | | 4. TYPE OF OBSERVATION <input checked="" type="checkbox"/> Ground-Visual <input type="checkbox"/> Ground-Radar <input type="checkbox"/> Air-Visual <input type="checkbox"/> Air-Intercept Radar | | | |
| 5. PHOTOS <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | 6. SOURCE civilian | | | |
| 7. LENGTH OF OBSERVATION 2 min 15 sec | | 8. NUMBER OF OBJECTS one | | 9. COURSE East | |
| 10. BRIEF SUMMARY OF SIGHTING Letter dated 13 Jul reporting object described as a bright light shaped like a slim saucer requesting form. Form completed on obj sighted Aug 5. Aug 5 sighting of obj in sight for 2 min 15 sec brighter than stars and less bright than meteor. Light orange to red in color. No sound. Exhaust trails apparent. flight passed through 90 degrees of arc in slow turn. | | | | 11. COMMENTS On July 13 witness requested form to make UFO report. Letter indicates that witness was 12 yrs old and that he would like to make a report of a sighting. After receipt of form sighting with date subsequent to request was made. Alleged sighting has characteristics of a/c. | |

34. Date you completed this questionnaire:

6

Day

August

Month

1963

Year

35. Information which you feel pertinent and which is not adequately covered in the specific points of the questionnaire or a narrative explanation of your sighting.

THE OBJECT WAS FIRST SEEN AT A
90° AND KEPT GOING AT A 90° WHEN
LAST SEEN IT WAS MAKING A 90° TURN.

13 ~~500~~

Log

~~XXXXXXXXXX~~

Union Ave

West Haven 16

Conn

Completed

164 to TTD

DEAR SIRs,

164 to
Complete

I would LIKE To REPORT A
U.F.O. IT WAS A BRIGHT LIGHT SHAPED
LIKE A SLIM SAUCER. I would appreciate
IT VERY much IF you would SEND ME
"FORM A" AND "FORM B", so I CAN GIVE you
MORE INFORMATION.

THANK You.

[REDACTED] [REDACTED]
[REDACTED] [REDACTED] STREET.
WEST HAVEN 16, CONN.

P.S. PLEASE ANSWER BECAUSE I AM
WORRIED.

OFFICE OF Public INFORMATION



DEPARTMENT OF THE AIR FORCE

WASHINGTON 25, D.C.

U.S. AIR FORCE TECHNICAL INFORMATION

This questionnaire has been prepared so that you can give the U.S. Air Force as much information as possible concerning the unidentified aerial phenomenon that you have observed. Please try to answer as many questions as you possibly can. The information that you give will be used for research purposes. Your name will not be used in connection with any statements, conclusions, or publications without your permission. We request this personal information so that if it is deemed necessary, we may contact you for further details.

1. When did you see the object?

13 August 1963
Day Month Year

2. Time of day:

8 48
Hour Minutes

(Circle One): A.M. or P.M.

3. Time Zone:

(Circle One): a. Eastern
b. Central
c. Mountain
d. Pacific
e. Other _____

(Circle One): a. Daylight Saving
b. Standard

4. Where were you when you saw the object?

West Haven Post Office West Haven Conn.
Nearest Postal Address City or Town State or County

5. How long was object in sight? (Total Duration)

0 2 15
Hours Minutes Seconds

a. Certain c. Not very sure
b. Fairly certain d. Just a guess

5.1 How was time in sight determined? clock

5.2 Was object in sight continuously? Yes ✓ No _____

6. What was the condition of the sky?

DAY NIGHT
a. Bright a. Bright
b. Cloudy b. Cloudy

7. IF you saw the object during DAYLIGHT, where was the SUN located as you looked at the object?

(Circle One): a. In front of you d. To your left
b. In back of you e. Overhead
c. To your right f. Don't remember

8. IF you saw the object at NIGHT, what did you notice concerning the STARS and MOON?

8.1 STARS (Circle One):

- a. None
- b. A few
- c. Many
- d. Don't remember

8.2 MOON (Circle One):

- a. Bright moonlight
- b. Dull moonlight
- c. No moonlight - pitch dark
- d. Don't remember

9. What were the weather conditions at the time you saw the object?

CLOUDS (Circle One):

- a. Clear sky
- b. Hazy
- c. Scattered clouds
- d. Thick or heavy clouds

WEATHER (Circle One):

- a. Dry
- b. Fog, mist, or light rain
- c. Moderate or heavy rain
- d. Snow
- e. Don't remember

10. The object appeared: (Circle One):

- a. Solid
- b. Transparent
- c. Vapor
- d. As a light
- e. Don't remember

11. If it appeared as a light, was it brighter than the brightest stars? (Circle One):

- a. Brighter
- b. Dimmer
- c. About the same
- d. Don't know

11.1 Compare brightness to some common object:

NOT as bright as a meteorite

12. The edges of the object were:

- (Circle One):
- a. Fuzzy or blurred
 - b. Like a bright star
 - c. Sharply outlined
 - d. Don't remember

e. Other _____

13. Did the object:

(Circle One for each question)

- | | | | |
|---|------------|-----------|------------|
| a. Appear to stand still at any time? | Yes | <u>No</u> | Don't know |
| b. Suddenly speed up and rush away at any time? | Yes | <u>No</u> | Don't know |
| c. Break up into parts or explode? | Yes | <u>No</u> | Don't know |
| d. Give off smoke? | Yes | <u>No</u> | Don't know |
| e. Change brightness? | <u>Yes</u> | No | Don't know |
| f. Change shape? | Yes | <u>No</u> | Don't know |
| g. Flash or flicker? | <u>Yes</u> | No | Don't know |
| h. Disappear and reappear? | <u>Yes</u> | No | Don't know |

14. Did the object disappear while you were watching it? If so, how?

15. Did the object move behind something at any time, particularly a cloud?

(Circle One): ☒ Yes ☐ No ☐ Don't Know. IF you answered YES, then tell what it moved behind: A TREE

16. Did the object move in front of something at any time, particularly a cloud?

(Circle One): ☐ Yes ☒ No ☐ Don't Know. IF you answered YES, then tell what in front of: _____

17. Tell in a few words the following things about the object:

a. Sound No sound

b. Color Light orange to Red

18. We wish to know the angular size. Hold a match stick at arm's length in line with a known object and note how much of the object is covered by the head of the match. If you had performed this experiment at the time of the sighting, how much of the object would have been covered by the match head?

About 1/3 of the object was covered by the match head.

19. Draw a picture that will show the shape of the object or objects. Label and include in your sketch any details of the object that you saw such as wings, protrusions, etc., and especially exhaust trails or vapor trails. Place an arrow beside the drawing to show the direction the object was moving.

EXHAUST TRAILS



20. Do you think you can estimate the speed of the object?

(Circle One) ☒ Yes ☐ No

IF you answered YES, then what speed would you estimate? 200 miles per hour

21. Do you think you can estimate how far away from you the object was?

(Circle One) ☒ Yes ☐ No

IF you answered YES, then how far away would you say it was? 5 miles up

22. Where were you located when you saw the object?
(Circle One):

- a. Inside a building
- b. In a car
- c. ☒ Outdoors
- d. In an airplane (type)
- e. At sea
- f. Other _____

23. Were you (Circle One)

- a. In the business section of a city?
- b. ☒ In the residential section of a city?
- c. In open countryside?
- d. Near an airfield?
- e. Flying over a city?
- f. Flying over open country?
- g. Other _____

24. IF you were MOVING IN AN AUTOMOBILE or other vehicle at the time, then complete the following questions:

24.1 What direction were you moving? (Circle One)

- | | | | |
|--------------|--------------|--------------|--------------|
| a. North | c. East | e. South | g. West |
| b. Northeast | d. Southeast | f. Southwest | h. Northwest |

24.2 How fast were you moving? _____ miles per hour.

24.3 Did you stop at any time while you were looking at the object?

(Circle One) ☐ Yes ☐ No

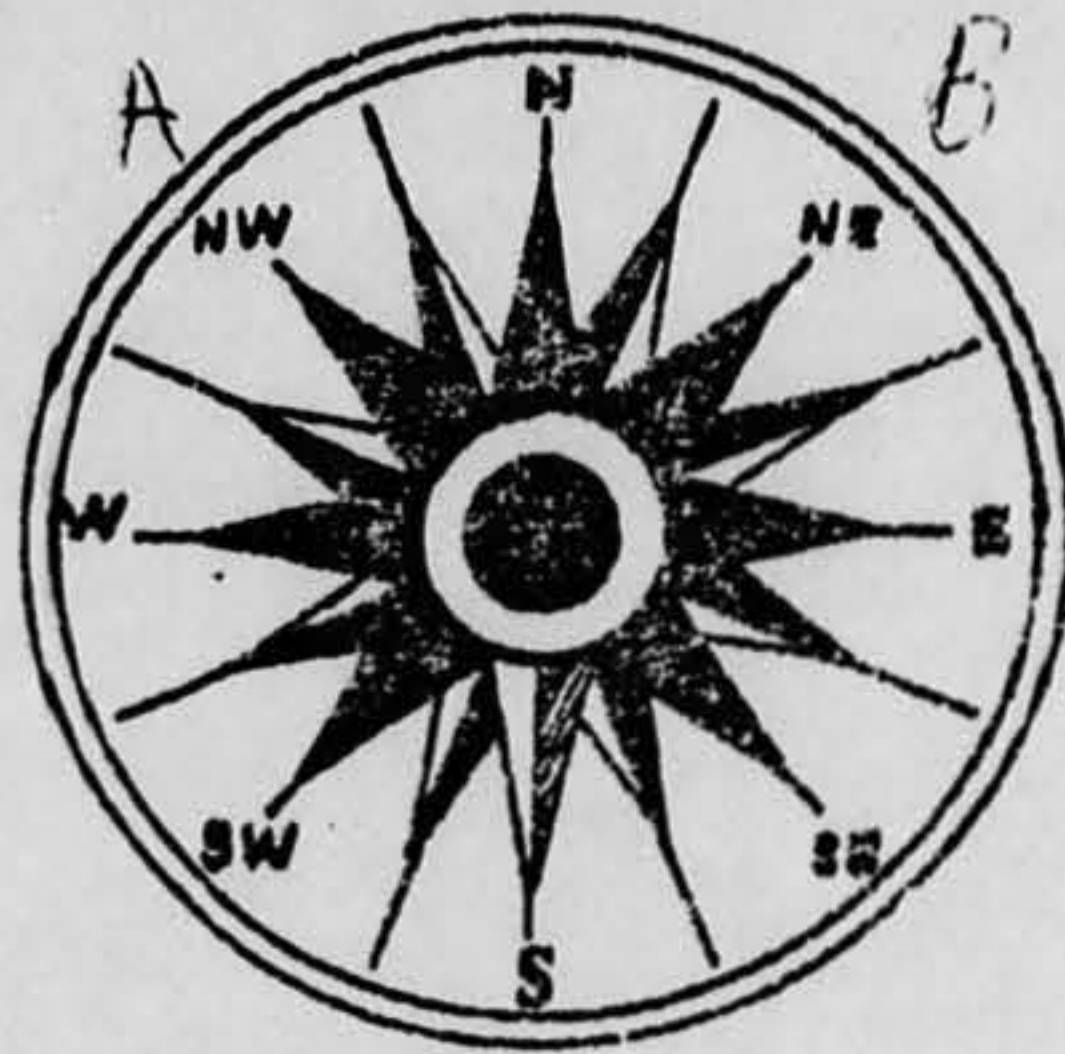
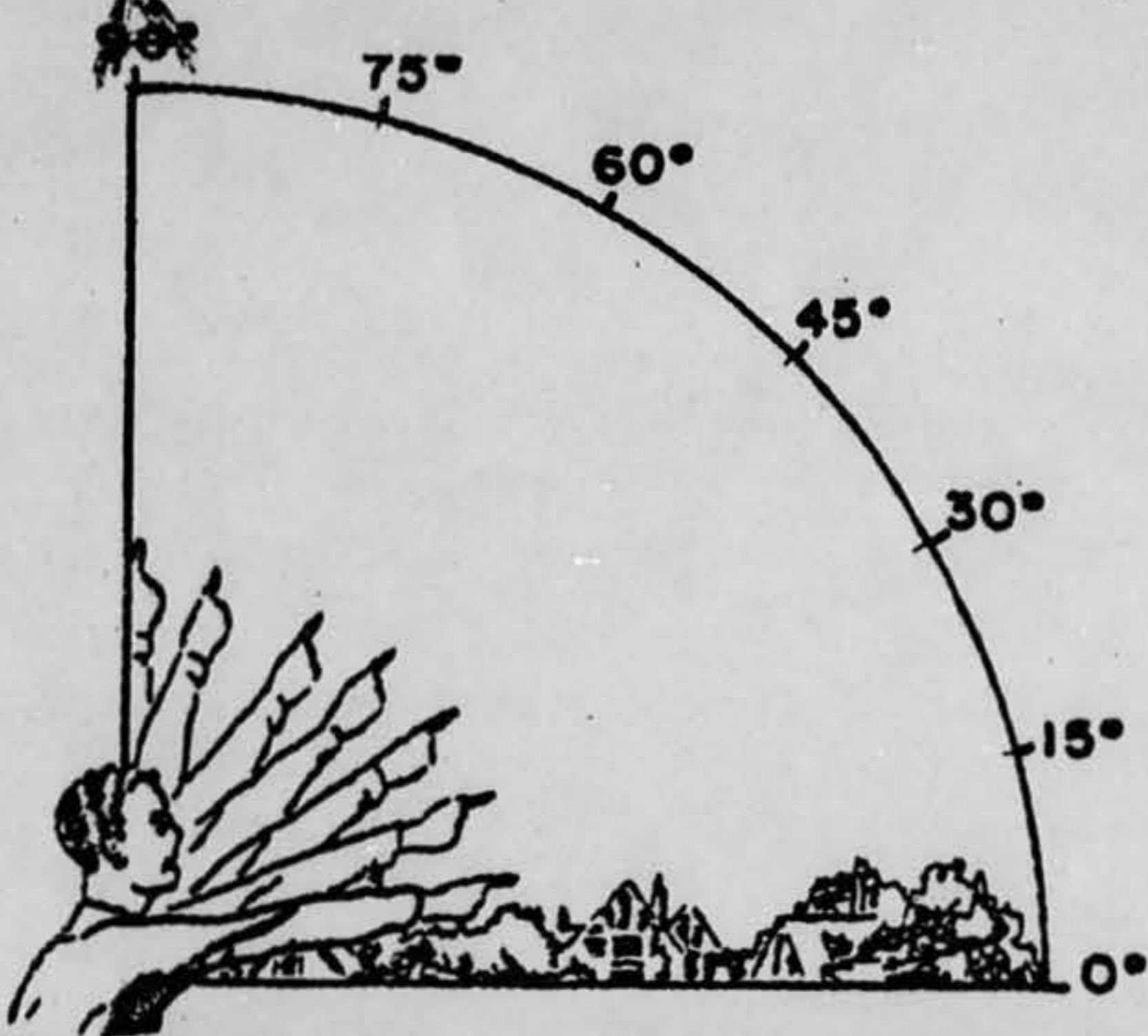
25. Did you observe the object through any of the following?

- | | | | | | |
|-----------------|-----|--|---------------|------------------|--|
| a. Eyeglasses | Yes | <input checked="" type="checkbox"/> No | e. Binoculars | Yes | <input checked="" type="checkbox"/> No |
| b. Sun glasses | Yes | <input checked="" type="checkbox"/> No | f. Telescope | Yes | <input checked="" type="checkbox"/> No |
| c. Windshield | Yes | <input checked="" type="checkbox"/> No | g. Theodolite | Yes | <input checked="" type="checkbox"/> No |
| d. Window glass | Yes | <input checked="" type="checkbox"/> No | h. Other | <u>Naked eye</u> | |

26. In order that you can give as clear a picture as possible of what you saw, describe in your own words a common object or objects which, when placed up in the sky, would give the same appearance as the object which you saw.

A satellite

27. In the following sketch, imagine that you are at the point shown. Place an "A" on the curved line to show how high the object was above the horizon (skyline) when you *first* saw it. Place a "B" on the same curved line to show how high the object was above the horizon (skyline) when you *last* saw it. Place an "A" on the compass when you *first* saw it. Place a "B" on the compass where you *last* saw the object.



28. Draw a picture that will show the motion that the object or objects made. Place an "A" at the beginning of the path, a "B" at the end of the path, and show any changes in direction during the course.



29. IF there was MORE THAN ONE object, then how many were there? _____

Draw a picture of how they were arranged, and put an arrow to show the direction that they were traveling.

30. Have you ever seen this, or a similar object before. If so give date or dates and location.

NO

31. Was anyone else with you at the time you saw the object? (Circle One) ☒ Yes ☐ No

31.1 IF you answered YES, did they see the object too? (Circle One) ☒ Yes ☐ No

31.2 Please list their names and addresses:

[REDACTED]
[REDACTED]
[REDACTED]

West Haven 16, Conn.

[REDACTED]
[REDACTED]
[REDACTED]

WEST HAVEN 16, Conn.

32. Please give the following information about yourself:

NAME [REDACTED] [REDACTED] [REDACTED]
Last Name First Name Middle Name

ADDRESS [REDACTED] WEST HAVEN 16 CONN
Street City Zone State

TELEPHONE NUMBER [REDACTED] AGE 12 SEX MALE

Indicate any additional information about yourself, including any special experience, which might be pertinent.

33. When and to whom did you report that you had seen the object?

6 August 1963
Day Month Year